

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET
P.O. BOX 942732
SACRAMENTO, CA 94234-7320



February 23, 1990
CMSP Letter 90-4

All County Welfare Directors

SUBJECT: CMSP Information Notice No. 1
English and Spanish Versions

This letter transmits to you camera-ready copies of the revised English and Spanish version of the CMSP Information Notice No. 1, entitled "Important Information About Your County Medical Services Program (CMSP) Card and Benefits". This notice clarifies the most current benefits under CMSP and reflects the correct amounts of beneficiary copayments for prescriptions and non-emergency room services. The notice has been revised to add excluded benefits on the back of the notice.

A copy of this notice must be given to applicants at the time of application and again when eligibility is determined. This notice may also be distributed to persons who are interested in knowing the CMSP scope of benefits without making application.

Upon receipt of this letter, the county is responsible for the immediate reproduction of an adequate supply of both notices, using the camera-ready copies enclosed, and for implementation of the notices. The county's remaining supply of any outdated notices should be destroyed upon receipt of the new supply of English and Spanish notices.

Please contact Sherrie Ivec of the CMSP Unit at (916) 739-3421, if you have any questions concerning this notice.

Sincerely

Jim Martinez, Chief
County Medical Services Program

Enclosures

CMSP Contact Persons (w/o enclosures)